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**BASIC RECEIPT TEMPLATE**

|  |  |  |  |
| --- | --- | --- | --- |
| Your Company Name |  | DATE |   |
| 123 Main Street |  | RECEIPT NO. |   |
| Hamilton, OH 44416 |  | CUSTOMER NO. |   |
| (321) 456-7890 |  |  |
| Email Address |  | ATTN: Name / Dept |
| SALESPERSON |   |  | Company Name |
| CREDIT CARD NO. |   |  | 123 Main Street |
| CHECK NO. |   |  | Hamilton, OH 44416 |
| MONEY ORD. NO. |   |  | (321) 456-7890 | Email Address |
|  |
| ITEM NO.  | DESCRIPTION | QTY | UNIT PRICE | TOTAL |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
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|   |   |   |   |   |
| Remarks / Instructions:  | SUBTOTAL |   |
| TAX  |   |
| SHIPPING / HANDLING |   |
| *Please make check payable to* Your Company Name. | OTHER |   |
| THANK YOU | TOTAL |  |
|  |
| CASH  |  |  CREDIT CARD |  | MONEY ORDER |  |
| *For questions concerning this receipt please contact* Name, (321) 456-7890, Email Address |
| www.yourwebaddress.com |
|  |  |  |  |  |  |  |
| **CLIENT** |  | SALES RECEIPT |
| ATTN: Name / Dept |  |
| Company Name |  | DATE |   |
| 123 Main Street |  | RECEIPT NO. |   |
| Hamilton, OH 44416 |  | AMOUNT PAID |   |
|  |
| Your Company Name | 123 Main Street | Email Address |
| (321) 456-7890 | Hamilton, OH 44416 | www.yourwebaddress.com |

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